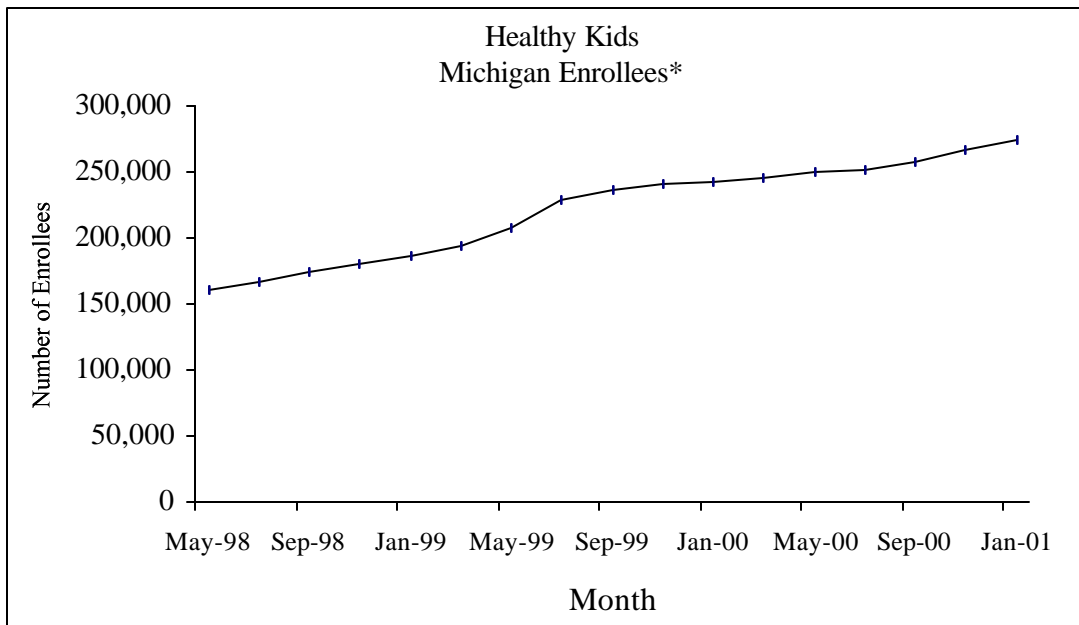
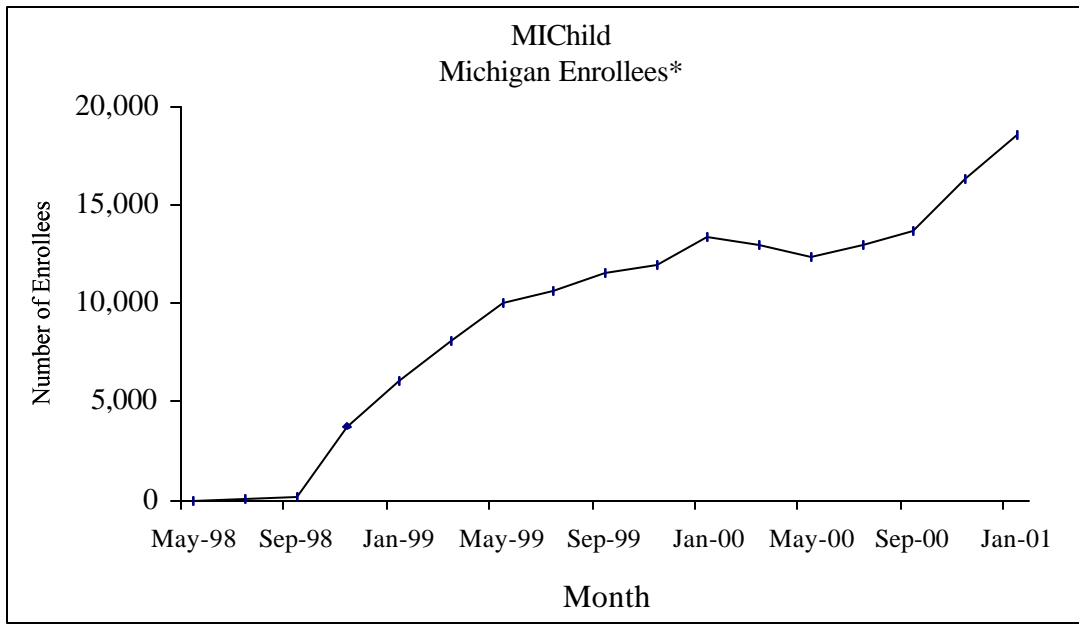


Focused Indicators
Preventive Health Care
MiChild and Healthy Kids Enrollment



Source: Medical Services Administration, MDCH
*Reported enrollment on the 1st day of each month

How are we doing?

Michigan is a national leader in providing insurance for all age groups and ranks among the top ten

states with the lowest number of uninsured children, according to the U.S. Census Bureau's Current Population Survey. Michigan's health insurance initiative, MICHild, provides health insurance to children of low and moderate-income families. Children under age 1 with family incomes between 185 percent and 200 percent of the federal poverty line, and children age 1 to 18 without health coverage and whose family income is between 150 and 200 percent of the federal poverty line are eligible under this initiative. The MICHild program, which started in May of 1998, provides Michigan children a comprehensive health plan for the modest cost of \$5 per month per family. MICHild enrollment is coordinated with Healthy Kids enrollment and both programs share a single application.

Healthy Kids is Michigan's Medicaid program for children whose family income is below 150 percent of the federal poverty line. Along with the introduction of MICHild, the Healthy Kids program expanded eligibility for children ages 16 through 18 in families with incomes up to 150 percent of the federal poverty line. Children under the age of one and pregnant women with family incomes up to 185 percent of the federal poverty line are also covered.

This indicator measures the number of children enrolled in MICHild and Healthy Kids at a point in time each month who, in most cases, would otherwise not have a medical home and access to many health care services. Enrollment in MICHild and Healthy Kids has risen steadily. For MICHild, enrollment has risen from five children in May of 1998 to 18,556 as of January 1, 2001. For Healthy Kids, enrollment has risen from 161,135 to 274,164 children during the same time period.

How does Michigan compare to other states?

Michigan is one of the nation's forerunners in the federal State Children's Health Insurance Program (SCHIP). Based on a 1999 Urban Institute study of children without health insurance, Michigan has provided over 80 percent of these children with comprehensive health coverage. This was one of the highest rates in the country.

In addition, according to a 2000 National Academy for State Health Policy report, Michigan is:

- \$ One of 6 states that has application process standards;
- \$ One of 2 states that has standards for pending applications;
- \$ One of 7 states that has standards for annual review;
- \$ One of 4 states that has time frames for making initial contact with new enrollees;
- \$ One of 3 states that has standards pertaining to transmission of enrollment data to the single state agency;
- \$ One of 2 states that has a time frame for mailing materials to applicants; and
- \$ One of 4 states that has a standard requirement for addressing the different aspects of grievance and complaint review.

How are different populations affected?

The department has very comprehensive outreach effort for the MICHild program. The combined Medicaid and MICHild application, pamphlets, and posters are currently in English, Arabic, and

Spanish. The toll-free telephone lines (1-888-988-6300) for the program offer translation services for all languages as well. The department also provides preventive and primary health care to its dually eligible Children's Special Health Care Services (CSHCS) and MICHild enrollees. Eligible children may choose to enroll in one of the CSHCS's managed care programs that will also provide MICHild services or receive services on a fee-for-service basis. In addition, the department is very active in outreach to the Native American community. The department has trained many of the tribal centers in Medicaid and MICHild eligibility and has enrollment assistance workers at each tribal center.

What other information is important to know?

Children with a medical home are more likely to receive preventive services and health education, less likely to miss school because of illnesses, and less likely to use the emergency room. The focus of Healthy Kids is to provide Medicaid-eligible children of low-income families with a medical home and access to primary, preventive, and other health care. When MICHild legislation was passed by the Michigan Legislature, it included an expansion in the eligibility of Healthy Kids, as noted above, for the children of low-income families.

The focus of MICHild is to provide health insurance to uninsured children of working low-to-moderate income families that are otherwise ineligible for Medicaid. The program has also served as an outreach program guiding eligible families to the Medicaid program. As of January 5, 2001, there were 56,557 referrals from MICHild to Healthy Kids and an estimated 91,000 children enrolled in Healthy Kids as a result of MICHild outreach.

Prior to the start of the MICHild initiative, the department estimated that 106,000 children were eligible for MICHild and Healthy Kids. The estimate for children eligible for MICHild was 34,000 children and for Healthy Kids 72,000 children.

What is the Department of Community Health doing to affect this indicator?

The department is actively working to decrease the number of uninsured children through MICHild and Healthy Kids enrollment. Under the department's No Wrong Door policy, families complete a simple application that is widely available in a variety of settings, including the Family Independence Agency, local public health departments, schools, and churches. The single application allows a family to apply for either MICHild or Healthy Kids coverage.

The department has worked with local Multi-Purpose Collaborative Bodies in the development of locally-driven, innovative outreach programs throughout the state. The outreach efforts continue to target families with uninsured children and include use of mass media as well as distribution of information and materials through schools systems and local organizations. The department has also offered widespread training assistance to community-based groups.

In August 2000, the department discontinued its requirement that families verify income when applying for MICHild and the Healthy Kids Program. This has resulted in over 90 percent of the applications

being complete when the department MICHild contractor receives them. At the same time, the department has implemented a shortened redetermination form for its annual eligibility review. The family only needs to verify the information (or change it as appropriate), sign the form, and return it. As with the initial application, no verification of income is required.

In February 2000, the department implemented a \$25 incentive fee for each child that the local health department refers to MICHild or Healthy Kids. To date, local health departments have received over \$470,000 in incentive payments.

The department has also used the WIC enrollment and Office of Child Support enrollment for outreach. Information on MICHild and Healthy Kids is sent to area schools every year. And the department has contacted community business organizations (small businesses, self-employed persons, etc.) for outreach efforts.

One other asset to the MICHild and Healthy Kids program is the co-location of Medicaid eligibility workers at the MICHild administrative site of business. This allows faster Medicaid determinations, better communication between the two programs, and more continuity of care for children transferring eligibility from one program to another.

Last updated: January 2001.